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Bib Data Sheet

CONFIRMATION NO. 3649

<b>SERIAL NUMBER</b> 09/964,678	<b>FILING DATE</b> 09/28/2001 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> 0609.4370002	
<b>APPLICANTS</b> Suzanne De La Monte, East Greenwich, RI; Jack R. Wands, Waban, MA;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/380,203 04/25/2000 WHICH IS A 371 OF PCT/US98/03685 02/26/1998 WHICH CLAIMS BENEFIT OF 60/038,908 02/26/1997					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/20/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>David H. Wands</u> Acknowledged <u>Examiner's Signature</u> Initials <u>BW</u>		<b>STATE OR COUNTRY</b> RI	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 26111					
<b>TITLE</b> Transgenic animals and cell lines for screening drugs effective for the treatment or prevention of Alzheimer's Disease					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		